Maternal Infant Early Childhood Home Visiting (MIECHV) – Formula (X02) Indiana State Department of Health, 2 North Meridian Street, Indianapolis, IN 46204-3021 Project Director: Mary Ann West, Director of Women, Children & Adolescent Health Programs Phone: 317-234-7732Email: mwest2@isdh.IN.gov Website: http://www.in.gov/isdh/25565.htm

ANNOTATION: The MIECHV program will provide Indiana resources to continue home visiting in the state and improve health and developmental outcomes for at-risk children and families through the evidence based programs Healthy Families Indiana (HFI) and Nurse-Family Partnership (NFP). Currently, Indiana is serving 1402 families. Clients are often characterized by a combination of risk factors including: mental illness, substance abuse, low educational attainment, history of interpersonal violence, single parenting, and limited access to health care. Home visiting services will address high-risk, low income families in need of services through education, intervention, and referrals to wrap around support services.

PROBLEM: Infant mortality, late or no prenatal care, maternal smoking, history of child maltreatment, unemployment, children in poverty, and single parent households are some of the leading indicators used to rank Indiana counties by need of home visiting services. By continuing to support local home visiting sites in the highest risk counties, Indiana will improve the health and social outcomes for the families served by these programs.

PURPOSE: The purpose of Indiana's Maternal, Infant, & Early Childhood Home Visiting (MIECHV) Program is to support the delivery of coordinated and comprehensive high-quality voluntary early childhood home visiting services to eligible families.

GOALS AND OBJECTIVES: Indiana's MIECHV Program vision is to improve health and development outcomes for children and families who are at risk through achievement of the following goals: 1) Provide appropriate home visiting services to women, their infants and families who are low-income and high-risk; 2) Develop a system of statewide coordinated home visiting services that provide appropriate, targeted, and unduplicated services and locally coordinated referrals; 3) Coordinate necessary services outside of home visiting programs to address needs of participants. These goals will be achieved through the following objectives:

- 1. By September 30, 2018, continue program implementation serving at least 1,640 new and continuing families.
- 2. By September 30, 2018, inform organizations in Indiana [that currently serve as a referral source for home visiting programs] regarding referral coordination and availability of services in order to provide appropriate, targeted, and unduplicated services to children, mothers, and families who are high-risk throughout Indiana.
- 3. By September 30, 2018, continue to increase the number of home visiting staff with the Indiana Association of Infant & Toddler Mental Health Endorsement (IMH-E®).
- 4. By September 30, 2018, at least 95% of families that require additional services beyond home visiting will receive a referral to an appropriate available community resource.
- 5. By September 30, 2018, at least 75% of families receiving appropriate referrals will have a confirmed receipt of service.

METHODOLOGY: HFI and NFP will provide home visiting services to at least 1,640 families in Elkhart, Grant, Lake, LaPorte, Marion, Scott and St. Joseph counties with these Formula funds. Outcomes for Improved Maternal and Newborn Health, Child Injuries/Abuse/Neglect, School Readiness and Achievement, Domestic Violence, Family Economic Self-Sufficiency, and Referral Coordination will be evaluated quarterly and reported annually. Quality Assurance and Improvement methodologies will ensure voluntary participants receive model adherent services and referrals.